



APPLICATION FOR TRAINING FUNDS
PEACE OFFICER STANDARDS AND TRAINING BOARD
PFN 16

Agency requesting funds _____

Date of request _____

Amount of funds requested _____

Course title and ND POST course number _____

Complete description of course

Dates, location, including address, where training will be presented _____

Breakdown of costs:

Instructor fees _____

Instructor lodging/travel _____

Course materials _____

Tuition per attendee _____

Lodging per attendee _____

Total number of attendees permitted in course _____

How many representatives/employees from the requesting agency will be permitted to attend?

How many representatives/employees from outside the requesting agency will be permitted to attend?

How will this training assist Law Enforcement?

How will the training requested be advertised?

How much funding has the hosting agency requested since the beginning of the biennium?

How much funding has the proposed vendor received since the beginning of the biennium?

What other alternative funding sources has the requesting agency attempted to secure (grants, NDIRF etc)?

Agency Director or authorized official approval signature and date_____

Point of contact for agency requesting funds:

Name_____

Email_____

Office phone_____

Cell number_____

Please verify that **ALL** information requested on this form has been completely filled out prior to submission to the North Dakota POST Board.

POST Board
PO Box 1054
Bismarck, ND 58502-1054